

## 18. SPECIALTY PROVIDERS

Specialty providers who serve a unique client base and offer only a subset of pediatric vaccines are eligible for the VFC Program. Specialty providers participating in the Montana VFC Program are listed below along with any special requirements unique to their situation. Unless otherwise noted below, specialty providers must follow all VFC requirements outlined in this handbook.

### *Family Planning Clinics*

The CDC defines a family planning clinic as a provider whose main purpose is to prescribe contraceptives and/or treat sexually transmitted diseases. Providers whose main services involve primary or acute care do not qualify as family planning clinics.

Family planning clinics have the following unique VFC requirements:

- Vaccine offerings at family planning clinics are limited to those relevant to their client base, such as human papilloma virus (HPV) and hepatitis B.
- Family planning clinics can administer VFC vaccine to an additional eligibility category:  
Unaccompanied minors less than 19 years of age who present at family planning clinics for contraceptive services or sexually transmitted disease (STD) treatment who do not know their insurance status due to the confidential nature of their visit.
- Family planning clinics must screen for this special eligibility category and document VFC vaccine given to this population per current Immunization Program instructions. The Immunization Program offers a special eligibility screening log for family planning clinics that captures this information. Contact the Immunization Program for current forms and procedures (444-5580 hhsiz@mt.gov).

### *Birthing Hospitals*

Hepatitis B vaccination is recommended for all infants soon after birth and before hospital discharge. The Montana Immunization Program funds a universal hepatitis B birth dose vaccine program for all infants born in the state. Because this program is partially funded through the VFC Program, Montana birthing hospitals must be enrolled in the VFC Program and fulfill all program requirements in order to receive publicly-supplied vaccine.

- Hepatitis B birth dose is the only publicly funded vaccine available to birthing hospitals.
- Because all newborns qualify for the vaccine, birthing hospitals are not required to screen patients for VFC eligibility prior to administering the vaccine. However, they must track birth dose recipients by VFC eligibility category using one of the methods described in Section 4 – Eligibility.
- Like all VFC providers, birthing hospitals must manage their vaccine orders, inventory, and cold chain in imMTrax either as integrated (entering patient-level information) or aggregate users (entering only aggregate doses administered). See Section 1 for definitions.
- Birthing hospitals must use State-supplied data loggers in all VFC vaccine storage units or provide their own approved, program-compliant thermometer as outlined in Section 14.

## Pharmacies

In 2011, the Montana Legislature passed Senate Bill 189 that allows pharmacists to provide influenza immunizations to children 12 years and older. Montana Medicaid currently does not reimburse claims for vaccine administered to Medicaid-eligible children 0 through 18 years of age due to the VFC Program providing vaccine free-of-charge to this population.

Pharmacies must enroll in the VFC Program in order to administer vaccine to VFC-eligible children and must agree to vaccinate all “walk-in” VFC-eligible children and not refuse to vaccinate VFC-eligible children based on a parent’s inability to pay the administration fee.

Because pharmacists only administer influenza vaccine, they qualify for streamlined oversight in the VFC Program if they:

- Received a documented enrollment visit prior to receiving vaccine
- Have a current site contract (signed by the pharmacist *and* cooperative practice provider)
- Have ordered vaccine within the calendar year
- Submit one month of temperature data from VFC vaccine storage units prior to storing vaccine.

Providers who qualify for streamlined oversight must implement all VFC program requirements. However, they are exempt from having a routine biennial compliance site visits (detailed in Section 7). The Immunization Program reserves the right to conduct a compliance site visit if deemed necessary.

Pharmacies must participate in imMTrax as integrated providers and submit to the Immunization Program on a monthly basis:

- Storage unit temperature logs
- An inventory report that includes:
  - Doses on hand by vaccine at beginning of reporting period
  - Doses received by vaccine during reporting period
  - Doses administered by age cohort during the reporting period
  - Doses of vaccine wasted/lost due to mishandling by vaccine for reporting period
  - Doses on hand by vaccine at the end of reporting period
  - Doses of vaccine administered by VFC eligibility category (See Section 4–Eligibility)

This information is automatically submitted to the Immunization Program when providers manage their VFC vaccine inventory in imMTrax, the state immunization registry.

In addition to participating in imMTrax, pharmacists must submit each month a statement signed by the pharmacist or cooperative practice provider certifying that no change in VFC Vaccine Manager or storage units has occurred since the last report submission. A standard form is available from the Immunization Program for this purpose.

If the required documentation is not submitted or it shows wasted/lost or unaccounted for vaccine greater than 5%, temperature excursions, or a statement of change in VFC Manager or storage units, the Immunization Program must follow up with the pharmacy before placing their vaccine order.

Pharmacies must use State-supplied data loggers in all VFC vaccine storage units or provide their own approved, program-compliant thermometer as outlined in Section 14.